

4509 Guide Meridian ☐ Bellingham, WA 98226 (206) 671-3936 • Fax (206) 671-8808

## PRE-EMPLOYMENT URINALYSIS AGREEMENT

PLEASE READ CAREFULLY

I freely and voluntarily agree to submit to a urinalysis (drug screen) as part of my application for employment. I understand that either refusal to submit to the urinalysis screen or failure to qualify according to the minimum standards established by the company for this screen may disqualify me from further consideration for employment.

I further understand that upon commencement of employment with the company I may again be required to submit to a urinalysis screen. I understand that refusal to take a requested urinalysis screen or failure to meet the minimum standards set for the screen, may result in immediate suspension or discharge.

Thave read in full and understand the above statements and conditions of employment.

Applicant's Signature	Date	
Driver License Information:		
State:		
Driver License No.		